

# 2012 ENROLLMENT/CHANGE FORM

## BASIC LIFE AND AD&D, DEPENDENT LIFE, SUPPLEMENTAL LIFE & AD&D

☐ **NEW ENROLLMENT**  
☐ **CHANGE**

ANTHEM LIFE – ADMINISTRATOR  
6740 N HIGH ST. – STE 200 – WORTHINGTON, OH 43085 FAX – (614) 433-8849 TOLL-FREE – (866) 227-4005

<p><b>EMPLOYEE NAME AND ADDRESS:</b></p> <p><input type="checkbox"/> Check here if name or address has changed</p> <p>Employee _____</p> <p style="text-align: center;">Last                      First                      M.I.</p> <p>Social Security Number _____</p> <p>Date of Hire: _____</p> <p>Agency Name: _____</p> <p><input type="checkbox"/> Male    <input type="checkbox"/> Female    Date of Birth _____ Age _____</p> <p>Address: _____</p> <p>City: _____ State _____ Zip _____</p> <p>Home Phone (____) _____</p> <p>Work Phone (____) _____ Ext _____</p>	<p><b>SPOUSE COVERAGE:</b></p> <p><input type="checkbox"/> Check here if covering spouse for the first time or if spouse has changed</p> <p>Spouse Name: _____</p> <p>Social Security Number: _____ Date of Birth _____</p> <p><b>EMPLOYEE'S BENEFICIARY:</b></p> <p><input type="checkbox"/> Check here if changing beneficiary</p> <p>Primary: _____</p> <p style="text-align: center;">Full Name                      Relationship                      Age</p> <p>Contingent: _____</p> <p style="text-align: center;">Full Name                      Relationship                      Age</p> <p><b>(Please use separate Beneficiary Form if requesting different beneficiaries per plan.)</b></p>
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### BASIC PLAN OPTIONS AND EMPLOYEE PREMIUMS - BASIC PLANS SELECT ONE OF THE BASIC PLANS

Plan 1: Life Insurance premium paid by the State. Coverage is Guarantee Issue.

Plan 2-6: Optional Life Insurance amounts, AD&D and Dependent coverage, paid by the employee. Coverage is Guarantee Issue.

		PLAN 1	PLAN 2	PLAN 3	PLAN 4	PLAN 5	PLAN 6
			<input type="checkbox"/> NEW <input type="checkbox"/> ADD <input type="checkbox"/> CANCEL	<input type="checkbox"/> NEW <input type="checkbox"/> ADD <input type="checkbox"/> CANCEL	<input type="checkbox"/> NEW <input type="checkbox"/> ADD <input type="checkbox"/> CANCEL	<input type="checkbox"/> NEW <input type="checkbox"/> ADD <input type="checkbox"/> CANCEL	<input type="checkbox"/> NEW <input type="checkbox"/> ADD <input type="checkbox"/> CANCEL
Employee Paid	LIFE (State Paid)	\$ 20,000	\$ 20,000	\$ 20,000	\$ 20,000	\$ 20,000	\$ 20,000
	ADDITIONAL LIFE			\$ 5,000	\$ 5,000		\$ 5,000
	AD&D Accidental Death & Dismemberment		\$ 20,000		\$ 25,000	\$ 20,000	\$ 25,000
	PER CHILD 15 days-26 yrs					\$ 3,000	\$ 3,000
	BI-WEEKLY DEDUCTION	\$ -	\$ 0.17	\$ 0.10	\$ 0.31	\$ 0.38	\$ 0.52

#### PLAN 7: OPTIONAL LIFE INSURANCE PLAN FOR SPOUSE

Optional Life Insurance Benefit for the Spouse. Paid by the employee.

Premium deductions are based on spouse's age and are increased automatically in accordance with the schedule below.

Coverage is Guarantee Issue.

Spouse coverage not available over age 70 and terminates at age 70.

Check where newly enrolling, adding or cancelling Plan 7 Spouse Life Insurance

#### PLAN 7 – \$10,000 SPOUSE LIFE

☐ New Enrollment ☐ Add ☐ Cancel

#### PLAN 8: OPTIONAL LIFE INSURANCE AND AD&D FOR EMPLOYEE AND/OR SPOUSE

If elected within 30 days of new hire eligibility for coverage, up to \$50,000 for Employee and \$25,000 for Spouse will be offered Guarantee Issue.

Any amount elected for the first time after 30 days of new hire eligibility or any increase in coverage requires completion of an Evidence of Insurability form, is subject to underwriting approval, and is effective **ONLY AFTER** approval by Anthem Life. Therefore, payroll deductions will not begin until the State has been notified of its approval.

Optional Life and AD&D Insurance for Employee and/or Spouse and are paid by the employee.

Premium deductions are based on age and are increased automatically in accordance with the schedule below. Evidence of insurability is required for all new additions or increases in Plan 8.

Employee coverage reduced by 50% at age 70 and terminates at retirement.

Spouse coverage not available over age 70 and terminates at age 70.

Check where newly enrolling, adding or cancelling Plan 8 Employee and/or Spouse Term Life and AD&D Insurance

#### PLAN 8 – TERM LIFE AND AD&D

EMPLOYEE				SPOUSE			
New	Add	Cancel		New	Add	Cancel	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$25,000	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$50,000	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$75,000	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$100,000	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Please see reverse for rates**

**Please sign authorization on reverse page**

**KEEP A COPY OF THIS FORM FOR YOURSELF -- FORWARD THE ORIGINAL FORM TO YOUR AGENCY HR/PAYROLL OFFICE. IF APPLYING FOR COVERAGE REQUIRING EVIDENCE OF GOOD HEALTH, ATTACH ANTHEMS' EVIDENCE OF INSURABILITY FORM WITH THIS APPLICATION FORM.**

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